



EASTERN ZONAL OFFICE, KOLKATA

PRE - QUALIFICATION OF CONTRACTORS

Life Insurance Corporation of India intends to invite tenders for the **Modernisation works (Civil & Interior works) at newly built Divisional Office building at Kharagpur**. The details of various works involved in the work are as follows:

Sl.no	Work	Estimated Cost (Rs. In Lac)	Completion period in months	Min Bank Solvency (Rs.in Lac)	Avg. Annual Turnover over last 4 years (Rs.in Lac)	Min. Value of Single work completed in last 4 years.
1	Civil & Interior works comprising, wooden storage, False ceiling, Entrance door, Wall paneling, Cash counter, Wooden partitions for chambers, Painting etc..	66.10	2	13.22	120.00 Lac	At least one work of Rs.60.00 Lac.

In case of LIC working contractors, 25% of Qualifying criteria may be relaxed.

Interested contractors having experience in similar nature of interior works and fulfilling above criteria, may apply in prescribed form (given below) for enrolment, to be downloaded from our web site www.licindia.in/tender_notice.htm. and filled in form to be submitted to **“The Chief Engineer, Life Insurance Corporation of India, Engineering Department, 4th floor, Hindustan Building, 4 Chittaranjan Avenue, Kolkata-700072”** along with non-refundable amount of **Rs.500/-, towards processing fee**, in the form of demand draft / pay order drawn in favour of **Life Insurance Corporation of India** payable at **Kolkata** on or before **22.12.2010**.

The name of all empanelled contractors shall be published in our website within 90 days(approximately) from the date of this publication.

Chief Engineer reserves the right to reject/issue of tender to any contractor at his sole discretion without assigning any reason whatsoever.

Date: 08.12.2010

Chief Engineer



LIFE INSURANCE CORPORATION OF INDIA

**ENGINEERING DEPARTMENT
EASTERN ZONAL OFFICE**

**HINDUSTHAN BUILDING, 4th FLOOR
4, CHITTARANJAN AVENUE
KOLKATA – 700 072.**

ENROLMENT FORM



**LIFE INSURANCE CORPORATION OF INDIA.
EASTERN ZONAL OFFICE
ENGINEERING DEPARTMENT
HINSUSTHAN BUILDING, 4th FLOOR
4, CHITTARANJAN AVENUE, KOLKATA – 700 072.**

INSTRUCTIONS FOR FILLING AND SUBMISSION OF ENROLMENT FORM

The Enrolment Form along with the Annexure A1, A2 and B to G shall be completely filled in all respect along with cost of Enrolment Form of **Rs 500/-** (non-refundable) by way of demand draft /pay order in favour of Life Insurance Corporation of India payable at Kolkata, addressed to the Chief Engineer, Life Insurance Corporation of India, Eastern Zonal Office, Hindusthan Buildings (4th Floor), 4, C.R. Avenue, Kolkata – 700 072 along with these instructions for filling and submission of Enrolment Form on or before **22.12.2010**. Please note that no consideration will be given for postal delays.

1. Contractors to note that all particulars required as per the form and Annexures shall be filled in completely in relevant strictly as per the format.
2. The forms not submitted strictly as per the above instructions within stipulated period are liable to be rejected,
3. The eligible agencies, which will be selected for issue of tenders after scrutiny of enrolment forms, shall be informed by a letter. Please note that no enquiries or correspondence regarding the selection for issue of tenders shall be entertained.
4. Latest Solvency Certificate from any Nationalised / Scheduled Bank as per advertisement should be submitted along with Enrolment Form.
5. The Contractors are advised to follow the instructions given below :
 - (a) Enrolment Form shall be filled-up in clean handwriting in capital letters or typed.
 - (b) Full address of the site of work, owner or authority under whom the works have been carried out should be given (Please refer Annexure D & E).
 - (c) The agencies should ensure to submit the satisfactory Completion Certificate giving the value of work, year of completion and it should also tally with the value of final bill in Annexure D.
 - (d) The annual turnover should be based on latest Income Tax Clearance Certificate duly cleared by Income Tax Department or audited balance sheet, copy of which should be enclosed.
6. Please note that the submission of this enrolment form does not confer any right on you to claim issue of tenders and the Chief Engineer reserves the right not to issue tender to any / all applicants without assigning any reason whatsoever.

Encl. : Enrolment Form with
Annexure A1, A2 and B to G

Signature of Contractor

Note : These instructions for filling and submission of Enrolment Form shall also be signed and submitted along with Enrolment Form with Annexure A1, A2 and B to G.

**LIFE INSURANCE CORPORATION OF INDIA
ENGINEERING DEPARTMENT**

EASTERN ZONE

FORM FOR ENROLMENT OF CONTRACTORS

I / We _____ am / are desirous of being enrolled on list of contractors for Main builders work including internal water supply and sanitary work for **Modernisation works (Civil & Interior works) at newly built Divisional Office building at Kharagpur.** and hereby apply for the same.

I / We give the following details for your consideration.

Sl.no	QUERY	ANSWER
1	Name of the firm :	
2	Address	
3	PAN No	
	TIN No.	
	VAT Registration No.	
4	Telephone Number	
	Office	
	Residence	
	Fax No.	
	Email	
5	Telegraphic Address, if any	
6	Month and year in which the firm was established in present name	
7	Particulars of old firm (if present firm is new)if main partners of the present firm were working as construction contractors, in some other name in the past (The partnership deed of old firm be enclosed).	
8	Particulars of sister construction firms, if any :	
9	i) What is the constitution of firm viz. Sole Proprietor, Partnership, Pvt. Ltd., Public Ltd., etc.	
	ii) Enclose copy of partnership deed, Articles of Association or Affidavit in case of sole proprietorship as per Annexure A-1.	
	iii) Fill-in enclosed Annexure A-2.	

10	Fill and enclose Annexure B giving details of enrolment with LIC of India in the past and with other organisations		
11	Has the applicant or his partners or Directors been black listed in the past by any Central or State Govt.Deptt./Organisation		
12	i) Annual Turn Over for last four years (enclose documentary evidence or proof to support figures)		YEAR
		i	2006-07
		ii	2007-08
		iii	2008-09
	iv	2009-10	
ii) What evidence of proof is enclosed to support the amounts of yearly turnover			
iii) Enclose latest income tax clearance Certificate		Certificate enclosed for Assessment year _____	
13	i) Name and complete postal address of bankers		
	ii) Enclose solvency certificate indicating amount.		
	iii) Bank Guarantee limit with Various banks		i) Rs. _____ Lac with _____ ii) Rs. _____ Lac with _____ iii) Rs. _____ Lac with _____ TOTAL
14	i) Enclose list of immovable properties with complete postal addresses, full description & reasonable market value of property duly supported by certificate of D.M./Collector/First Class Magistrate/ approved valuer.		
	ii) Whose supporting certificate is enclosed		Rs. _____ of _____ Date _____
15	i) Particulars of movable properties along with Banker's reference		
	Value of tools & plants		Rs.
	Other Assets		Rs.
	Total		Rs.
ii) Whose reference is enclosed?			

16	Fill in and enclose list of tools & plants as per Annexure-C enclosed.		
17	Fill in & enclose Annexure-D giving full particulars about major works completed during past Four years NOTE: List of only those works which are carried out by firm requesting for enrolment is to be given.		
18	Work in Progress:		
	i) Whether full details of major work on hand given in Annexure 'E'		
	ii) Are copies of work orders for such large works enclosed.		
19	Whether full information regarding permanent technical staff employed given in Annexure 'F'		
20	i) How do you normally carry out works of water supply, sanitary and plumbing installations		
	ii) Who is the license holder and what is his experience of this work.		
21	i) How do you normally get work of electrical installations carried out		
	ii) Who is the license holder & what is his experience		
22	Any other information the applicant might like to give		

DECLARATION

I/We agree to notify the officer accepting this application and registering my/our names on list of contractors of Life Insurance Corporation of India, of any changes in the foregoing particulars as and when they occur and to verify and confirm these annually on 1st January.

I/We understand and agree that the appropriate Life Insurance Corporation of India Authority has the right as he may decide, not to issue tender form in any particular case and also to suspend, remove or blacklist my/our name from Life Insurance Corporation of India list of contractors in the event of my/our submitting non-bonafide tenders or for technical or other delinquency in regard to which the decision of appropriate Life Insurance Corporation of India Authority shall be final and conclusive.

I/We certify that the particulars furnished in the enrolment forms are correct and that should it be found that I/We have given a false certificate or that if I/We fail to notify the fact of my/our subsequent amalgamation with another contractor or firm, the Life Insurance Corporation of India may remove my/our name from the list of contractors and any contract that I/We may be holding at the time may be rescinded.

PLACE :

DATE :

SIGNATURE OF CONTRACTOR

: FOR OFFICE USE ONLY :

ENROLMENT FORM NO. _____ ISSUED TO _____

NOTE: THE FILLED IN ENROLMENT FORM SHOULD REACH IN THE OFFICE ON OR BEFORE 22.12.2010.

SIGNATURE OF ISSUING OFFICER

A F F I D A V I T

(On Non Judicial Stamp paper of Rs.* _____/- in case the individual who is the sole proprietor of the firm)

I

..... s/o
..... age years, occupation business r/o
..... do hereby state on oath as under:

That I am residing in locality of
District since last years.

That I am the sole proprietor of a proprietary concern name and style as
“.....” having it’s office at
District dealing in business of Government, civil contracts and
ancillary works attached therefore.

Hence this affidavit.

Deponent _____

Note: **This Affidavit should be notarized.**

LIFE INSURANCE CORPORATION OF INDIA

CONSTITUTION OF FIRM – SOLE PROPRIETORSHIP/PARTNERSHIP/LTD.CO./OTHER

DETAILS OF CONSTITUTENTS

Sr. No.	Name of sole partner or Director / other High Officials	Age	Share	Technical Experience			Whether power of attorney Holder
				Year to Year to	As Employee	As contractor	
1	2	3	4	5	6	7	8

SIGNATURE OF CONTRACTOR

LIFE INSURANCE CORPORATION OF INDIA**PARTICULARS OF ENROLMENT WITH LIC AND OTHER ORGANIZATION**

I. ENROLMENT WITH LIC :

Name of works for 1)

Which enrolled by 2)

L.I.C. in the past 3)

4)

Sr. Nos. for which tenders were submitted :

Sr. Nos. for which work-order was received:

II. ENROLMENT WITH OTHER ORGANISATIONS:

Sr. No.	Name & Address of Authority with whom you are enrolled	FIRST TIME ENROLMENT		LAST RENEWAL OR ENROLMENT			
		Year to year	Is copy of letter enclosed	Year to year	Class or Category	Limit (Rs. in Lac)	Is copy of letter enclosed
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

SIGNATURE OF CONTRACTOR

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF SHUTTERING TOOLS AND PLANT

Sr. No.	Item	Specification	Quantity	Estimated Value	Remarks
(1)	(2)	(3)	(4)	(5)	(6)
1.	a) Shuttering plates b) Shuttering Wooden Planks c) Wooden props d) Steel props				
2.	Concrete Mixers				
3.	Concrete Vibrators i) Petrol Driven ii) Electric Driven				
4.	Tower Hoist				
5.	Trucks				
6.	Welding Equipments				
7.	Pump-Sets				
8.	Floor-Polishing Machine				
9.	Cranes				
10.	Others				

SIGNATURE OF CONTRACTOR

LIFE INSURANCE CORPORATION OF INDIA

LIST OF MAJOR SIMILAR NATURE OF WORKS COMPLETED DURING LAST **FOUR** YEARS

Sr. No.	Name and Complete Postal Address of			Order			Value of work as per final bill (Rs. in Lac)	Commencement of work month Year	Completion of work month Year	Penalty levied for delay of completion, if any
	Site of Work & Nature of Work	Owner	Authority under whom work was carried	Ref. No. & Date	Contract Amount (Rs. in Lac)	Is copy enclosed				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

SIGNATURE OF CONTRACTOR

LIFE INSURANCE CORPORATION OF INDIA

LIST OF SIMILAR NATURE OF WORKS IN HAND

Sr. No.	Name and Complete Postal Address of			Order			Date of commencement of work	Scheduled date of completion of work	Progress made and expected date of completion and reasons for delay, if any
	Site of Work & Nature of Work	Owner	Authority under whom work was carried out	Ref. No. & Date	Amount (Rs. in Lac)	Is copy enclosed			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

SIGNATURE OF CONTRACTOR

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF PERMANENT TECHNICAL STAFF

Sr. No.	Name	Designation	Age	Academic Qualification	Service with the Firm	Details of Experience Year to Year
(1)	(2)	(3)	(4)	(5)	(6)	(7)

SIGNATURE OF THE CONTRACTOR

ANNEXURE – G**ENROLMENT CHECKLIST**

CHECKLIST FOR ENROLMENT:

Sr. No.	Description of Enclosure	Refer Item of form
1.	Partnership deed / Articles of Association / Affidavit (★) (★) Annexure A-1 (Appendix VII – B)	8 (ii)
2.	Annexure (A-2) as supplied	8 (ii) (Particulars of Partners)
3.	Annexure – E (as supplied)	9 (Particulars of enrolment in LIC and other Organization)
4.	Proof of Turnover	11 (ii)
5.	Latest I.T.C.C.	11 (iii)
6.	Solvency Certificate	12 (ii)
7.	Certificate of Bank Guarantee	12 (iii)
8.	Immovable Property Certificate	13 (ii)
9.	Movable Property reference	14 (i)
10.	(★) Annexure 'C' (as supplied)	15 (Particulars of shuttering tools/ plant)
11.	(★) Annexure 'D' (as supplied)	16 (List of major works completed during last 4 years)
12.	(★) Annexure 'E' (as supplied)	17 (List of work in hand)
13.	(★) Copies of work order	17 (ii)
14.	(★) Annexure 'F' (as supplied)	18 (Particulars of permanent technical staff)

NOTE: Suitable modification to the above shall be made for different kind of Works.